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NEWS 24	AUG 15	CAplus currency for Korean patents enhanced
NEWS 25	AUG 25	CA/CAplus, CASREACT, and IFI and USPAT databases enhanced for more flexible patent number searching
NEWS 26	AUG 27	CAS definition of basic patents expanded to ensure comprehensive access to substance and sequence information

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=> s Il1(w)Ra and (neuro? or brain or trauma or epilepsy or hemorrhage or stroke or
ocular) and human
L1          13 IL1(W) RA AND (NEURO? OR BRAIN OR TRAUMA OR EPILEPSY OR HEMORRHA
               GE OR STROKE OR OCULAR) AND HUMAN

=> s l1 and treatment
L2           3 L1 AND TREATMENT

=> dup rem l1
PROCESSING COMPLETED FOR L1
L3           9 DUP REM L1 (4 DUPLICATES REMOVED)

=> dup rem l2
PROCESSING COMPLETED FOR L2
L4           3 DUP REM L2 (0 DUPLICATES REMOVED)

=> dis ibib abs l3

L3   ANSWER 1 OF 9  CAPLUS  COPYRIGHT 2008 ACS on STN
ACCESSION NUMBER:        2006:471905  CAPLUS
DOCUMENT NUMBER:         144:482204
TITLE:                   Transgenic animals conditionally expressing
                         inflammatory molecules as inflammation models in
                         neurodegenerative and arthritic disorders, and
                         drug screening uses
INVENTOR(S):             Kyrkanides, Stephanos; O'Banion, M., Kerry
PATENT ASSIGNEE(S):      University of Rochester, USA
SOURCE:                  PCT Int. Appl., 222 pp.
```

CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2006053343	A2	20060518	WO 2005-US42058	20051114
WO 2006053343	A3	20070322		
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KM, KN, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, LY, MA, MD, MG, MK, MN, MW, MX, MZ, NA, NG, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SM, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW				
RW: AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LT, LU, LV, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG, BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM				
EP 1814385	A2	20070808	EP 2005-851904	20051114
R: AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LI, LT, LU, LV, MC, NL, PL, PT, RO, SE, SI, SK, TR, AL, BA, HR, MK, YU				
IN 2007DN04179	A	20070831	IN 2007-DN4179	20070601

PRIORITY APPLN. INFO.:	US 2004-627604P	P	20041112
	US 2005-646097P	P	20050120
	WO 2005-US42058	W	20051114

AB Disclosed are animal models which conditionally express one or more inflammatory mols. including prostaglandin-synthesizing enzymes, such as cyclooxygenase (COX), and pro-inflammatory cytokines, such as interleukin-1β (IL-1β) or IL-1 receptor antagonist (IL1 -RA). Disclosed are methods and compns. related to vectors, cells, transgenic animals, and methods of making and using thereof in developing models of inflammatory diseases. In examples, the role of COX-2 (2) in the development of IL-1β induced arthritis was demonstrated.

=> dis ibib abs l3 2-9

L3 ANSWER 2 OF 9 CAPLUS COPYRIGHT 2008 ACS on STN
ACCESSION NUMBER: 2006:1220393 CAPLUS
DOCUMENT NUMBER: 146:161266
TITLE: The reoperation for infective complications after major surgery of pancreas does not evoke additional cytokine response
AUTHOR(S): Slotwinski, Robert; Olszewski, Waldemar L.; Lech, Gustaw; Chaber, Andrzej; Slodkowski, Maciej; Zaleska, Marzanna; Krasnodebski, Ireneusz W.
CORPORATE SOURCE: Dept. of Surgical Research & Transplantology, Medical Research Center, Polish Academy of Sciences, Warsaw, Pol.
SOURCE: Central European Journal of Immunology (2006), 31(1-2), 31-35
CODEN: CJIMFW; ISSN: 1426-3912
URL: http://www.termedia.pl/showpdf.php?article_id=6827&filename=the
PUBLISHER: Termedia
DOCUMENT TYPE: Journal; (online computer file)

LANGUAGE: English

AB Blood cytokines are accepted as semiquant. markers of the operative tissue trauma and mediators of the host immune response. There is not enough data on the cytokine response following a secondary trauma in the same individual, as an early reoperation, which may influence the clin. course after surgical reintervention and predict the outcome. The reoperation, usually performed within the first week after primary surgery, is an addnl. burden for the immune system. The objective of this study was to evaluate how does the reoperation affect the level of serum blood cytokines. Does another rise of the proinflammatory or rather of the anti-inflammatory cytokines take place or is there a decrease as an effect of elimination of the source of local infection. Studies were carried out in 43 patients with pancreatic carcinoma before and after operation and reoperation. We measured serum levels of IL6, IL1 ra and sTNFR1 before and after first operations and after reoperations performed because of infective complications of the pancreatic cancer surgery. Although a high postoperative rise of serum IL-6, IL-1 ra and sTNFRI levels in patients after pancreatectomy over the preoperative values was observed, there was no increase in cytokine concentration after re-operation performed because of infective complications. Albeit the serum cytokine levels are good markers of the immune reactivity of surgical patients to the first operative trauma and in certain cases early predictors of the postoperative infective complications, their diagnostic value after reoperations is questionable.

REFERENCE COUNT: 35 THERE ARE 35 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L3 ANSWER 3 OF 9 MEDLINE on STN

ACCESSION NUMBER: 2006415403 MEDLINE

DOCUMENT NUMBER: PubMed ID: 16719908

TITLE: Monthly intravenous methylprednisolone in relapsing-remitting multiple sclerosis - reduction of enhancing lesions, T2 lesion volume and plasma prolactin concentrations.

AUTHOR: Then Bergh Florian; Kumpfel Tania; Schumann Erina; Held Ulrike; Schwan Michaela; Blazevic Mirjana; Wismuller Axel; Holsboer Florian; Yassouridis Alexander; Uhr Manfred; Weber Frank; Daumer Martin; Trenkwalder Claudia; Auer Dorothee P

CORPORATE SOURCE: Section of Neurology, Max-Planck-Institut fur Psychiatrie, Munchen, Germany.. ThenBerF@medizin.uni-leipzig.de

SOURCE: BMC neurology, (2006) Vol. 6, pp. 19. Electronic Publication: 2006-05-23.
Journal code: 100968555. E-ISSN: 1471-2377.

PUB. COUNTRY: England: United Kingdom

DOCUMENT TYPE: (CLINICAL TRIAL)
(COMPARATIVE STUDY)
Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 200608

ENTRY DATE: Entered STN: 14 Jul 2006
Last Updated on STN: 2 Aug 2006
Entered Medline: 1 Aug 2006

AB BACKGROUND: Intravenous methylprednisolone (IV-MP) is an established treatment for multiple sclerosis (MS) relapses, accompanied by rapid, though transient reduction of gadolinium enhancing (Gd+) lesions on brain MRI. Intermittent IV-MP, alone or with immunomodulators, has been suggested but insufficiently studied as a strategy to prevent relapses. METHODS: In an open, single-cross-over study, nine patients with relapsing-remitting MS (RR-MS) underwent cranial Gd-MRI once monthly for twelve months. From month six on, they received a single

i.v.-infusion of 500 mg methylprednisolone (and oral tapering for three days) after the MRI. Primary outcome measure was the mean number of Gd+ lesions during treatment vs. baseline periods; T2 lesion volume and monthly plasma concentrations of cortisol, ACTH and prolactin were secondary outcome measures. Safety was assessed clinically, by routine laboratory and bone mineral density measurements. Soluble immune parameters (sTNF-RI, sTNF-RII, IL1-ra and sVCAM-1) and neuroendocrine tests (ACTH test, combined dexamethasone/CRH test) were additionally analyzed. RESULTS: Comparing treatment to baseline periods, the number of Gd+ lesions/scan was reduced in eight of the nine patients, by a median of 43.8% (p = 0.013, Wilcoxon). In comparison, a pooled dataset of 83 untreated RR-MS patients from several studies, selected by the same clinical and MRI criteria, showed a non-significant decrease by a median of 14% (p = 0.32). T2 lesion volume decreased by 21% during treatment (p = 0.001). Monthly plasma prolactin showed a parallel decline (p = 0.027), with significant cross-correlation with the number of Gd+ lesions. Other hormones and immune system variables were unchanged, as were ACTH test and dexamethasone-CRH test. Treatment was well tolerated; routine laboratory and bone mineral density were unchanged. CONCLUSION: Monthly IV-MP reduces inflammatory activity and T2 lesion volume in RR-MS.

L3 ANSWER 4 OF 9 BIOSIS COPYRIGHT (c) 2008 The Thomson Corporation on STN
ACCESSION NUMBER: 2006:208163 BIOSIS
DOCUMENT NUMBER: PREV200600209891
TITLE: Acute pancreatitis post spinal fusion surgery in children with cerebral palsy, neuromuscular and idiopathic scoliosis.
AUTHOR(S): Mehta, Devendra; He, Zhaoping; Tonb, Dalal; Jadhav, Pallavi; Brenn, Randall; McCloskey, John; Shah, Suken; Miller, Freeman; Dabney, Kirk; Nadal, Tracey; Koletty, Stacey; Theroux, Mary
SOURCE: Gastroenterology, (APR 2005) Vol. 128, No. 4, Suppl. 2, pp. A174.
Meeting Info.: Annual Meeting of the American-Gastroenterological-Association/Digestive-Disease-Week. Chicago, IL, USA. May 14 -19, 2005. Amer Gastroenterol Assoc.
CODEN: GASTAB. ISSN: 0016-5085.
DOCUMENT TYPE: Conference; (Meeting)
Conference; Abstract; (Meeting Abstract)
LANGUAGE: English
ENTRY DATE: Entered STN: 29 Mar 2006
Last Updated on STN: 29 Mar 2006

AB Introduction: Acute pancreatitis (AP) is a common complication in children undergoing posterior spinal fusion for correction of scoliosis. We have shown that AP is associated with intra-operative blood loss and cytokine release immediately after surgery in children with cerebral palsy (CP) scoliosis. Objectives: The purpose of this report is to expand the study population to include children with idiopathic (ID) and neuromuscular (NM) scoliosis with the following specific aims: 1) to investigate whether AP is also a common complication in other types of scoliosis and whether blood loss is associated with AP as in CP patients, 2) to determine cytokine levels in all three groups, 3) to determine whether genetic alleles that have in the past been implicated with high cytokine responses or the development of pancreatitis are associated with AP. Methods: After obtaining IRE approval, 56 CP, 25 NM and 68 ID were enrolled in the study. Serum cytokines were assayed by using ELISA, DNA was isolated from buccal smears and polymorphisms and mutations were detected using PCR. AP was diagnosed using clinical criteria as welt as greater than threefold elevation of amylase or lipase. Results: 1) Children who developed AP (24) were predominately found in the CP (23/24;

P < 0.05). Blood loss was significantly higher in the AP group comparing with the non-AP (3,367 +/- 2,405 ml vs. 1649 +/- 1,109 ml; P < 0.05). In addition, children in the AP group weighed significantly less (31 +/- 10 Kg) compared to the non-AP (48.8 +/- 19 Kg; P < 0.05). Hospital stay of the AP was also significantly longer (P < 0.05) comparing with the non-AP. 2) Cytokines such as IL-6 and IL-8 dramatically elevated after the surgery in all patients but only the peak level of IL-6 was significantly higher in AP (3,367 +/- 2,405 pg/ml) comparing with non-AP (1,649 +/- 1,109 pg/ml, P < 0.05). 3) DNA from 18 AP and 81 controls was tested for polymorphisms of TNFa-308, TNFb, IL1-b, IL1-ra, MCP-1-251 and SPINK1. The distribution of the wild type and mutated alleles of these genes was similar between AP and non-AP. Conclusions: 1). The rate of AP is much higher in the CP population than that in others, this risk is accounted for by low weight and increased blood loss seen in the CP. 2) AP is associated with the amount of intraoperative blood loss, low body weight and high levels of IL-6 release. 3) The polymorphisms of cytokine genes and SPINK1 are not directly correlated with the development of AP in these patients.

L3 ANSWER 5 OF 9 MEDLINE on STN
ACCESSION NUMBER: 2005594951 MEDLINE
DOCUMENT NUMBER: PubMed ID: 16273760
TITLE: Cytokines, cytokine antagonists and soluble adhesion molecules in patients with ocular Behcet's disease treated with human recombinant interferon-alpha2a. Results of an open study and review of the literature.
AUTHOR: Kotter I; Koch S; Vonthein R; Ruckwaldt U; Amberger M; Gunaydin I; Zierhut M; Stubiger N
CORPORATE SOURCE: University Hospital, Department of Internal Medicine II (Haematology, Oncology, Immunology and Rheumatology), Tubingen, Germany.. ina.koetter@med.uni-tuebingen.de
SOURCE: Clinical and experimental rheumatology, (2005 Jul-Aug) Vol. 23, No. 4 Suppl 38, pp. S20-6.
Journal code: 8308521. ISSN: 0392-856X.
PUB. COUNTRY: Italy
DOCUMENT TYPE: (CLINICAL TRIAL)
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 200601
ENTRY DATE: Entered STN: 9 Nov 2005
Last Updated on STN: 13 Jan 2006
Entered Medline: 12 Jan 2006

AB OBJECTIVE: To elucidate the influence that interferon-alpha exerts on the cytokine network in active ocular Behcet's disease (BD).
METHODS: Fifty patients with active ocular BD were treated with human recombinant interferon-alpha2a (rhIFN-alpha2a). Serum was analysed for the presence of IL-10, TNF-alpha, IL-8, IL-6, sIL-2R, IFN-gamma, IFN-alpha, IL-12, IL-4, sTNFRI (p55), sTNFRII (p75), IL-1RA, G-CSF, sE-selectin, sVCAM-1, sICAM-1 and neopterin before initiation of and at several time points during IFN treatment and compared to 21 healthy controls. RESULTS: The levels of IFN-alpha IL1-RA and sTNFRII were significantly increased in the patients at baseline in comparison to healthy controls. During treatment with rhIFN-alpha2a, when remission was achieved as defined by the scoring system used, a significant increase in levels of IFN-alpha, IL-2R, TNF-alpha, sTNF-RII, sICAM-1, sVCAM-1, neopterin in the serum was observed, with a tendency towards increased IL-1RA as well. In contrast, leuko- and thrombocyte counts and sE-selectin serum levels significantly decreased. Positive correlations were found between IFN dosage or serum levels and sVCAM-I, neopterin, sTNF-RII and sIL-2R, between sVCAM-1, sIL-2R, TNF-alpha,

sTNF-RII and neopterin, sICAM-I and sVCAM-1, sIL2-R and sTNF-RII, and, finally, between sIL2-R and sICAM-I. CONCLUSIONS: IFN-alpha exerts diverse influences mainly on cytokine antagonists and soluble adhesion molecules. Because sTNF-RII and IL-1RA were increased by IFN-alpha treatment, these might be interesting alternative treatment options in refractory BD. Some of the side-effects of IFN-alpha may be caused by activation of monocytes, which is reflected by an increase in neopterin serum levels.

L3 ANSWER 6 OF 9 CAPLUS COPYRIGHT 2008 ACS on STN
ACCESSION NUMBER: 2004:857681 CAPLUS
DOCUMENT NUMBER: 141:343430
TITLE: Methods, including gene therapy, for treating xerostomia and xerophthalmia using genes, proteins, and/or chemicals that are radioprotective and antioxidant in the ductal space
INVENTOR(S): Bennett, Michael J.; Chen, Yen-Ju
PATENT ASSIGNEE(S): Genteric Inc., USA
SOURCE: PCT Int. Appl., 58 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2004087873	A2	20041014	WO 2004-US9194	20040326
WO 2004087873	A3	20070607		
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NA, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW				
RW: BW, GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG, AP, EA, EP, OA				
US 20050043258	A1	20050224	US 2004-811028	20040325
PRIORITY APPLN. INFO.:			US 2003-458793P P	20030326
			US 2004-811028 A	20040325

AB The present invention provides methods for protecting or treating a tissue from a condition that elicits xerostomia or xerophthalmia associated with radiotherapy, autoimmune disorder, infection, and other conditions. A method is provided for attenuating increases in the concns. of harmful agents including radiation-induced free radicals, superoxide anions and heavy metal cations comprising the steps of contacting a cell with gene(s) encoding protein(s) when expressed, neutralize(s) or eliminate(s) the harmful agents in the targeted cell. In a preferred embodiment, the beneficial encoded protein(s) delivered to the cell may include a metallothionein, superoxide dismutase (SOD), catalase, glutathione peroxidase (GPx)- 4, or gamma glutamyl transpeptidase. Sequences for gene delivery vectors are provided. In addition, the present invention describes the use of catheters to apply fluid that contains genes, protein, and/or chems. that are radioprotective in the ductal space of salivary or lacrimal glands. Expression of recombinant catalase, MnSOD, and human INF-α in rat submandibular salivary glands was demonstrated. Prevention of irradiation damage to salivary glands by MnSOD was also demonstrated.

L3 ANSWER 7 OF 9 BIOSIS COPYRIGHT (c) 2008 The Thomson Corporation on STN
ACCESSION NUMBER: 2003:379560 BIOSIS
DOCUMENT NUMBER: PREV200300379560
TITLE: TEMPORAL CORRELATES OF NEUROINFLAMMATION IN THE G93A - SOD1 MOUSE MODEL OF AMYOTROPHIC LATERAL SCLEROSIS.
AUTHOR(S): Hensley, K. [Reprint Author]; Floyd, R. A. [Reprint Author]; Mou, S. [Reprint Author]; Pye, Q. N. [Reprint Author]; Stewart, C. A. [Reprint Author]; West, M. S. [Reprint Author]; Williamson, K. S. [Reprint Author]
CORPORATE SOURCE: Free Radical Biol and Aging Res Prg, Oklahoma Medical Research Fnd, Oklahoma City, OK, USA
SOURCE: Society for Neuroscience Abstract Viewer and Itinerary Planner, (2002) Vol. 2002, pp. Abstract No. 888.8. http://sfn.scholarone.com. cd-rom.
Meeting Info.: 32nd Annual Meeting of the Society for Neuroscience. Orlando, Florida, USA. November 02-07, 2002. Society for Neuroscience.
DOCUMENT TYPE: Conference; (Meeting)
Conference; (Meeting Poster)
Conference; Abstract; (Meeting Abstract)
LANGUAGE: English
ENTRY DATE: Entered STN: 20 Aug 2003
Last Updated on STN: 20 Aug 2003

AB Multiprobe ribonuclease protection assays (RPAs) were used to investigate expression of 36 different cytokines and apoptosis-related genes in spinal cords of mice that ubiquitously express human SOD1 bearing a glycine fwdarw alanine substitution at residue 93 (G93A-SOD1). Mice were studied at late presymptomatic stage (80 D), and at 120 D when the animals experience severe hindlimb paralysis. Spinal cord tissue from G93A-SOD1 mice expressed a subset of macrophage-typical cytokines (monokines) including IL1alpha, IL1beta and IL1RA at 80 D increasing by 120 D. Contrastingly, T-cell derived cytokines (lymphokines) including IL2, IL3 and IL4 were detected at low levels in nontransgenic mice but these were not elevated in G93A-SOD1 mice even at 120 D. Apoptosis-related genes were generally unaffected at 80 D but caspases and death receptor components were upregulated at 120 D; a notable exception being the TNF-RI which was upregulated at 80D and increased further at 120 D. These data indicate that in the G93A-SOD1 mouse (1) cytokine expression changes precede bulk protein oxidation and apoptosis gene expression; (2) lymphocyte contributions to cytokine expression in FALS are likely minor; and (3) TNFalpha and its receptors may link inflammation to apoptosis in ALS. Based on these findings, a microglial cell culture model was developed to identify anti-TNFalpha compounds that might prove efficacious in ALS.

L3 ANSWER 8 OF 9 MEDLINE on STN DUPLICATE 1
ACCESSION NUMBER: 2001290925 MEDLINE
DOCUMENT NUMBER: PubMed ID: 11373460
TITLE: Blunted erythropoietic response to anemia in multiply traumatized patients.
AUTHOR: Hobisch-Hagen P; Wiedermann F; Mayr A; Fries D; Jelkmann W; Fuchs D; Hasibeder W; Mutz N; Klingler A; Schobersberger W
CORPORATE SOURCE: Division for General and Surgical Intensive Care Medicine, Clinic for Anesthesia and Intensive Care Medicine, The Leopold Franzens University Innsbruck, Innsbruck, Austria.
SOURCE: Critical care medicine, (2001 Apr) Vol. 29, No. 4, pp. 743-7.
Journal code: 0355501. ISSN: 0090-3493.
PUB. COUNTRY: United States
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)
(RESEARCH SUPPORT, NON-U.S. GOV'T)
LANGUAGE: English

FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals
ENTRY MONTH: 200106
ENTRY DATE: Entered STN: 18 Jun 2001
Last Updated on STN: 18 Jun 2001
Entered Medline: 14 Jun 2001

AB OBJECTIVES: To assess the relations between anemia, serum erythropoietin (EPO), iron status, and inflammatory mediators in multiply traumatized patients. DESIGN: Prospective observational study. SETTING: Intensive care unit. PATIENTS: Twenty-three patients suffering from severe trauma (injury severity score > or =30). INTERVENTIONS: None. MEASUREMENTS AND MAIN RESULTS: Blood samples were collected within 12 hrs after the accident (day 1) and in the morning on days 2, 4, 6, and 9 to determine blood cell status, serum EPO, tumor necrosis factor-alpha (TNF-alpha), soluble tumor necrosis factor-receptor I (sTNF-rI), interleukin-1 receptor antagonist (IL1-ra), interleukin-6 (IL-6), neopterin, and iron status, respectively. Hemoglobin concentration was low at admission (mean, 10.0 g/dL; range, 6.8-12.9 g/dL) and did not increase during the observation time. Serum EPO concentration was 49.8 U/L (mean value) on day 1 and did not show significant increases thereafter. No correlation was found between EPO and hemoglobin concentrations. TNF-alpha remained within the normal range. sTNF-rI was high at admission and increased further. IL1 -ra was above the normal range. IL-6 was very high at admission and did not decrease thereafter. The initial neopterin concentration was normal, but increased until day 9. Serum iron was significantly decreased on day 2 posttrauma and remained low during the study. Serum ferritin increased steadily from day 2, reaching its maximum on day 9. In contrast, concentrations of transferrin were low from admission onward. CONCLUSIONS: Multiply traumatized patients exhibit an inadequate EPO response to low hemoglobin concentrations. Thus, anemia in severe trauma is the result of a complex network of bleeding, blunted EPO response to low hemoglobin concentrations, inflammatory mediators, and a hypoferremic state.

L3 ANSWER 9 OF 9 MEDLINE on STN DUPLICATE 2
ACCESSION NUMBER: 1996317165 MEDLINE
DOCUMENT NUMBER: PubMed ID: 8734359
TITLE: Blood cytokine levels rise even after minor surgical trauma.
AUTHOR: Grzelak I; Olszewski W L; Zaleska M; Durlik M; Lagiewska B; Muszynski M; Rowinski W
CORPORATE SOURCE: Surgical Research and Transplantation Department, Polish Academy of Sciences, Warsaw.
SOURCE: Journal of clinical immunology, (1996 May) Vol. 16, No. 3, pp. 159-64.
Journal code: 8102137. ISSN: 0271-9142.
PUB. COUNTRY: United States
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)
(RESEARCH SUPPORT, NON-U.S. GOV'T)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 199701
ENTRY DATE: Entered STN: 28 Jan 1997
Last Updated on STN: 6 Feb 1998
Entered Medline: 14 Jan 1997

AB The exact changes in cytokine production and clinical implications of the increased cytokine levels following operative trauma remain unclear. In this study, systemic production of a spectrum of cytokines, including IL1 alpha, IL1 beta, IL6, IL8, IL10, and IFN gamma, was examined in patients undergoing minor elective operative trauma. The levels of IL1 receptor antagonist (ra) and IL6 soluble receptor (sR) were also determined. Although there were no changes in IL1 alpha and IL1 beta

plasma levels during the entire observation period, there was a significant rise in IL1 ra level in all patients between postoperative day 1 and postoperative day 14. A significant increase in the IL6 plasma level was seen on days 1, 3, and 7 after surgery and an increase in the IL6 sR level was observed on postoperative days 10 and 14. Interestingly, the IL8 plasma values had risen significantly on days 1 and 3 following the operation. In some patients, an elevation in IL10 plasma level was noted on days 1 and 3 postsurgery. Results demonstrated that even a minor surgical procedure such as cholecystectomy with uneventful wound healing was followed by an appearance in the blood circulation of significant levels of cytokines between day 1 and day 14 after surgery. These observations point to the necessity of searching for methods of down-regulating the systemic cytokine effects after surgical trauma for the routine postoperative management.

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